

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Midwest Values PAC

ADDRESS (number and street)

P.O. Box 583232

☐Check if different  
than previously  
reported. (ACC)

Minneapolis

MN

55458

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00416131

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

02

01

2006

through

02

28

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Borman

Signature of Treasurer

Electronically Filed by Thomas Borman

Date

03

17

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Midwest Values PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		106715.81
(b) Cash on Hand at Beginning of Reporting Period .....	167290.51	
(c) Total Receipts (from Line 19) .....	35679.52	125522.85
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	202970.03	232238.66
7. Total Disbursements (from Line 31) .....	41307.37	70576.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	161662.66	161662.66
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name  
Midwest Values PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	32500.00	104300.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	2677.00	19622.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	35177.00	123922.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	35177.00	124922.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	418.50	427.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	84.02	173.35
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	35679.52	125522.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	35679.52	125522.85

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	38772.37	66941.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	38772.37	66941.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	535.00	635.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	535.00	635.00
29. Other Disbursements.....	2000.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41307.37	70576.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	41307.37	70576.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	35177.00	124922.00
34. Total Contribution Refunds (from Line 28(d)) .....	535.00	635.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34642.00	124287.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	38772.37	66941.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	418.50	427.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	38353.87	66513.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Larry Aidem		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 250 W. 94th Street #8A		<b>Transaction ID:</b> C330295
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Sundance Channel, LLC	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Leslie Bond		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 500 Greenleaf		<b>Transaction ID:</b> C290532
City Glencoe	State IL	Zip Code 60022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Phil Donahue		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 850 Third Avenue		<b>Transaction ID:</b> C330499
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self-Employed	Occupation Entertainment	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Frances Franken		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 583232		
City	State	Zip Code
Minneapolis	MN	55458
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> C330009
Amount of Each Receipt this Period		1000.00
Name of Employer Alan Franken, Inc.		Occupation Administrator
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		1000.00

<b>B.</b> Full Name (Last, First, Middle Initial) Gregory Heyman		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 6
Mailing Address 540 Madison Ave.		
City	State	Zip Code
New York	NY	10022
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> C330504
Amount of Each Receipt this Period		2000.00
Name of Employer Tribeca Productions		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		2000.00

<b>C.</b> Full Name (Last, First, Middle Initial) Hazel Lichterman		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address 514 West End Ave.		
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> C291535
Amount of Each Receipt this Period		1000.00
Name of Employer N/A		Occupation Homemaker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Judy McGrath

Mailing Address 1515 Broadway, 28th Floor

City State Zip Code  
 New York NY 10036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MTV Networks

Occupation  
Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: C330497

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Lorne Michaels

Mailing Address 88 Central Park West

City State Zip Code  
 New York NY 10023

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NBC/Broadway Video

Occupation  
Writer/Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 7 / 2 0 0 6

Transaction ID: C290440

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Jane Rosenthal

Mailing Address 1 West 72nd Street

City State Zip Code  
 New York NY 10023-3425

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TribecaProductions

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: C330007

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.** Full Name (Last, First, Middle Initial)  
Peter Shotridge  
Mailing Address 495 Portland Ave.

City State Zip Code  
St. Paul MN 55102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northland Organic Foods  
Corp

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 1 / 2 0 0 6

Transaction ID: C290082

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
John Tishman  
Mailing Address 666 Fifth Avenue

City State Zip Code  
New York NY 10103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tishman Realty & Construc-  
tion Co., Inc

Occupation  
Real Estate/Construction Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: C330008

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Christine Wasserstein

Mailing Address 1030 Fifth Ave  
Apt. 11

City State Zip Code  
New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: C330298

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Ronnie Weiner		Date of Receipt MM / DD / YYYY 02 / 28 / 2006	
Mailing Address 1125 5th Avenue		<b>Transaction ID:</b> C330498	
City New York	State NY	Zip Code 10128	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Harvey Weinstein		Date of Receipt MM / DD / YYYY 02 / 28 / 2006	
Mailing Address 375 Greenwich Street Third Floor		<b>Transaction ID:</b> C330294	
City New York	State NY	Zip Code 10013	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Weinstein Company	Occupation Film Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

32500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

**A.**

Full Name (Last, First, Middle Initial)

Premier Parking

Mailing Address P.O. Box 3754

City

Minneapolis

State

MN

Zip Code

55403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

417.50

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: C330763

Amount of Each Receipt this Period

417.50

Refund: Invoiced in Error

**SUBTOTAL** of Receipts This Page (optional) .....

417.50

**TOTAL** This Period (last page this line number only) .....

417.50

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** A.J. Goodman Consulting

Mailing Address 444 Brickell Av.e #51-470

City State Zip Code  
Miami FL 33131

Purpose of Disbursement  
Consulting - Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41893**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

**B.** Andrew Barr

Mailing Address 1431 W. 27th St.

City State Zip Code  
Minneapolis MN 55408

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41860**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

961.38

Full Name (Last, First, Middle Initial)

**C.** Andrew Barr

Mailing Address 1431 W. 27th St.

City State Zip Code  
Minneapolis MN 55408

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41879**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

961.37

**SUBTOTAL** of Disbursements This Page (optional) .....

9422.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A. David Benson</b> Full Name (Last, First, Middle Initial) Mailing Address 2151 Grand Ave, #7 City Saint Paul State MN Zip Code 55105 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D41880</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 1090.25
<b>B. David Benson</b> Full Name (Last, First, Middle Initial) Mailing Address 2151 Grand Ave, #7 City Saint Paul State MN Zip Code 55105 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D41861</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1090.25
<b>C. Blue State Digital, LLC</b> Full Name (Last, First, Middle Initial) Mailing Address 1000 Vermont Avenue, NW City Washington State DC Zip Code 20005 Purpose of Disbursement Internet Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D41870</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 321.25

**SUBTOTAL** of Disbursements This Page (optional) .....

**2501.75**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** Blue State Digital, LLC

Mailing Address 1000 Vermont Avenue, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41888**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7151.79

Full Name (Last, First, Middle Initial)

**B.** Blue State Digital, LLC

Mailing Address 1000 Vermont Avenue, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Internet Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41892**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

**C.** Capital Accounting Services

Mailing Address 4190 Vinewood Lane, Ste. 111-554

City Plymouth State MN Zip Code 55442

Purpose of Disbursement  
Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41864**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9661.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** Dinah Dale Consulting, Inc.

Mailing Address 131 Burntside Drive

City Golden Valley State MN Zip Code 55422

Purpose of Disbursement  
Consulting - Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41863**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6500.00

Full Name (Last, First, Middle Initial)

**B.** EFTPS - US Treasury

Mailing Address

City Washington State DC Zip Code

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41881**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1203.26

Full Name (Last, First, Middle Initial)

**C.** Kinko's/Fedex

Mailing Address 2189 Snelling Ave.

City Saint Paul State MN Zip Code 55113

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41889**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

497.56

**SUBTOTAL** of Disbursements This Page (optional) .....

8200.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kinko's/Fedex		<b>Transaction ID:</b> D41890 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	2		2	0	0	6													
Mailing Address 2189 Snelling Ave.		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">58.58</td> </tr> </table>	58.58																			
58.58																						
City Saint Paul      State MN      Zip Code 55113																						
Purpose of Disbursement Supplies																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Kinko's/Fedex		<b>Transaction ID:</b> D41891 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	4		2	0	0	6													
Mailing Address 2189 Snelling Ave.		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">116.09</td> </tr> </table>	116.09																			
116.09																						
City Saint Paul      State MN      Zip Code 55113																						
Purpose of Disbursement Supplies																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) MN Department of Revenue		<b>Transaction ID:</b> D41882 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	5		2	0	0	6													
Mailing Address Mail Station 1173		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">230.00</td> </tr> </table>	230.00																			
230.00																						
City Saint Paul      State MN      Zip Code 55146																						
Purpose of Disbursement Payroll Taxes																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

**SUBTOTAL** of Disbursements This Page (optional) .....

404.67

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** Nancy Kohn Consulting, Inc.

Mailing Address 101 W. Grand, Suite 200

City Chicago State IL Zip Code 60610

Purpose of Disbursement  
Consulting - Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D41887

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 1 6 / 2 0 0 6

Amount of Each Disbursement this Period

5089.35

Full Name (Last, First, Middle Initial)

**B.** NGP Software

Mailing Address 5505 Connecticut Ave.

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Software Support

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D41862

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 0 1 / 2 0 0 6

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

**C.** Premier Parking

Mailing Address P.O. Box 3754

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D41878

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 1 3 / 2 0 0 6

Amount of Each Disbursement this Period

417.50

**SUBTOTAL** of Disbursements This Page (optional) .....

6706.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** Sonnenschein Nath & Rosenthal

Mailing Address 233 S. Wacker Drive, 78th Floor

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Food - Event

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D41871

Date of Disbursement

/   /

Amount of Each Disbursement this Period

201.25

Full Name (Last, First, Middle Initial)

**B.** US Postmaster

Mailing Address 180 Kellogg Blvd.

City Saint Paul State MN Zip Code 55101

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D41883

Date of Disbursement

/   /

Amount of Each Disbursement this Period

390.00

Full Name (Last, First, Middle Initial)

**C.** US Postmaster

Mailing Address 180 Kellogg Blvd.

City Saint Paul State MN Zip Code 55101

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D41869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

78.00

**SUBTOTAL** of Disbursements This Page (optional) .....

669.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City Minneapolis State MN Zip Code 55479

Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41865**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

62.00

Full Name (Last, First, Middle Initial)

**B.** Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City Minneapolis State MN Zip Code 55479

Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41866**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

193.40

Full Name (Last, First, Middle Initial)

**C.** Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City Minneapolis State MN Zip Code 55479

Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D41867**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.00

**SUBTOTAL** of Disbursements This Page (optional) .....

260.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City Minneapolis State MN Zip Code 55479

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D41868**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.00

Full Name (Last, First, Middle Initial)

**B.** Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City Minneapolis State MN Zip Code 55479

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D41898**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

**C.** Wells Fargo Bank, N.A.

Mailing Address P.O. Box B 514

City Minneapolis State MN Zip Code 55479

Purpose of Disbursement

Bank Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D41899**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

219.98

**SUBTOTAL** of Disbursements This Page (optional) .....

253.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** David Benson

Mailing Address 2151 Grand Ave, #7

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
See Memo Entries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D41872

Date of Disbursement

/   /

Amount of Each Disbursement this Period

256.27

Full Name (Last, First, Middle Initial)

**B.** BCBS of Minnesota

Mailing Address P.O. Box 64676

City Saint Paul State MN Zip Code 55164

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D41873

Date of Disbursement

/   /

Amount of Each Disbursement this Period

164.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Dawn Frederick

Mailing Address 2151 Grand Ave.

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
Internet

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D41874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

256.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A. OfficeMax</b> Full Name (Last, First, Middle Initial) Mailing Address 1490 W. University Ave. City Saint Paul State MN Zip Code 55104 Purpose of Disbursement Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D41875</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 2.77 <b>[MEMO ITEM]</b>
<b>B. US Postmaster</b> Full Name (Last, First, Middle Initial) Mailing Address 180 Kellogg Blvd. City Saint Paul State MN Zip Code 55101 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D41876</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 58.50 <b>[MEMO ITEM]</b>
<b>C. David Benson</b> Full Name (Last, First, Middle Initial) Mailing Address 2151 Grand Ave, #7 City Saint Paul State MN Zip Code 55105 Purpose of Disbursement See Memo Entries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D41884</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 238.40

**SUBTOTAL** of Disbursements This Page (optional) .....

238.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

Full Name (Last, First, Middle Initial)

## **A. Office Depot**

Mailing Address 1615 W. County Road C

City Roseville State MN Zip Code 55113

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D41885

Date of Disbursement

02 / 16 / 2006

Amount of Each Disbursement this Period

133.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Verizon Wireless**

Mailing Address P.O. Box 25506

City Lehigh Valley State PA Zip Code 18002

Purpose of Disbursement  
Telephone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D41886

Date of Disbursement

02 / 16 / 2006

Amount of Each Disbursement this Period

105.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. David Benson**

Mailing Address 2151 Grand Ave, #7

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement  
See Memo Entries

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D41894

Date of Disbursement

02 / 26 / 2006

Amount of Each Disbursement this Period

195.44

**SUBTOTAL** of Disbursements This Page (optional) .....

195.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** OfficeMax

Mailing Address 1490 W. University Ave.

City State Zip Code  
Saint Paul MN 55104

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D41895

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2006

Amount of Each Disbursement this Period

112.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** US Postmaster

Mailing Address 180 Kellogg Blvd.

City State Zip Code  
Saint Paul MN 55101

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D41896

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2006

Amount of Each Disbursement this Period

83.15

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

38772.37



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Midwest Values PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Roy Bohl		<b>Transaction ID:</b> D35676 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	6		2	0	0	6													
Mailing Address 3636 Scott St. #201		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>35.00</td> </tr> </table>	35.00																			
35.00																						
City San Francisco State CA Zip Code 94123																						
Purpose of Disbursement <input type="checkbox"/> Refund Contribution Candidate Name	<input type="text"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Lester N. Coney		<b>Transaction ID:</b> D41877 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	0		2	0	0	6													
Mailing Address 4722 S. Greenwood		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																						
City Chicago State IL Zip Code 60615																						
Purpose of Disbursement <input type="checkbox"/> Refund Contribution Candidate Name	<input type="text"/> Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

535.00

**TOTAL** This Period (last page this line number only) ..... ►

535.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Midwest Values PAC

Full Name (Last, First, Middle Initial)

**A.** IHCR 2006

Mailing Address 29 S. LaSale, Ste. 960

City  
Chicago

State  
IL

Zip Code  
60603

Purpose of Disbursement  
Contribution (Non-Federal)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D41897

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	6

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

2000.00